

12-01-06

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PTO/SB/21 (07-06)

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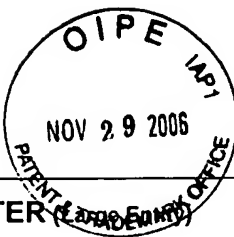
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| | | | |
|---|-----------------------------|-------------------------------|-----------|
| TRANSMITTAL FORM (to be used for all correspondence after initial filing) | Application Number | 10/606,711 | |
| | Filing Date | June 26, 2003 | |
| | First Named Inventor | Stephen Dirk Pacetti | |
| | Group Art Unit | 1773 | |
| | Examiner Name | Sheeba Ahmed | |
| Total Number of Pages in This Submission | 15 | Attorney Docket Number | 50623.266 |

| ENCLOSURES (check all that apply) | | |
|---|--|--|
| <input checked="" type="checkbox"/> Deposit Account 07-1850 Authorization <input checked="" type="checkbox"/> Postage Paid Return Postcard <input checked="" type="checkbox"/> Amendment and Response to Office Action (12 pages) <input checked="" type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Petition for Extension of Time (___ month) <input type="checkbox"/> Information Disclosure Statement with Form PTO-1449 citing ___ References <input checked="" type="checkbox"/> Express Mail Label No. EV 721 156 183 US <input checked="" type="checkbox"/> Certificate of Mailing <input checked="" type="checkbox"/> Amendment Transmittal Letter (1 page) (in duplicate) | <input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) Formal ___ Sheets with Submission of Formal <input type="checkbox"/> Issue Fee Transmittal with PTO-85b (in duplicate) <input type="checkbox"/> Request for Continued Examination Transmittal (RCE) <input type="checkbox"/> Fee Transmittal Form (1 page) (in duplicate) <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer (1 page) <input type="checkbox"/> Statement of Common Ownership <input type="checkbox"/> CD, Number of CD(s) ____ | <input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Request for Status of Application <input type="checkbox"/> Other Enclosure(s) (please identify below): |
| <div>Remarks</div> | | |

| SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT | |
|--|---|
| Firm or Individual name | Squire, Sanders & Dempsey L.L.P. Zhaoyang Li, Ph.D., Reg. No. 46,872 |
| Signature | |
| Date | November 29, 2006 |

| CERTIFICATE OF MAILING | | | |
|---|---------------|------|-------------------|
| I hereby certify that this correspondence is being deposited with the United States Postal Service as Express Mail in an envelope addressed to: Mail Stop AF, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date below: | | | |
| Typed or printed name | Yayoi Barrack | | |
| Signature | | Date | November 29, 2006 |

**AMENDMENT TRANSMITTAL LETTER (Large Format)**

Docket No.

50623.266

Applicant(s): Stephen Dirk Pacetti

Serial No.

10/606,711

Filing Date

June 26, 2003

Examiner

Sheeba Ahmed

Group Art Unit

1773

Invention:

Coatings For Implantable Medical Devices Comprising Hydrophobic And Hydrophilic Polymers

TO THE COMMISSIONER FOR PATENTS:

Transmitted herewith is an amendment in the above-identified application.


The fee has been calculated and is transmitted as show below.

CLAIMS AS AMENDED

| | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST # PREV. PAID FOR | NUMBER EXTRA CLAIMS PRESENT | RATE | ADDITIONAL FEE |
|--|-------------------------------------|-----------------------------|--------------------------------|------------|----------------|
| TOTAL CLAIMS | 27 | 29 | 0 | X \$50.00 | \$00.00 |
| INDEP. CLAIMS | 3 | 3 | 0 | X \$200.00 | \$00.00 |
| Multiple Dependent Claims (check if applicable) <input type="checkbox"/> | | | | | \$00.00 |
| TOTAL ADDITIONAL FEE FOR THIS AMENDMENT | | | | | \$00.00 |

- ☒ No additional fee is required for amendment.
- ☐ Please charge Deposit Account No. **07-1850** in the amount of \$
A duplicate copy of this sheet is enclosed.
- ☐ A check in the amount of _____ to cover the filing fee is enclosed.
- ☒ The Commissioner is hereby authorized to charge payment of any necessary fees associated with this communication or credit any overpayment to Deposit Account No. **07-1850**.
A duplicate copy of this sheet is enclosed.
- ☐ Any additional filing fees required under 37 C.F.R. 1.16.
- ☐ Any patent application processing fees under 37 C.F.R. 1.17.

Dated: November 29, 2006
 Squire, Sanders & Dempsey L.L.P.
 1 Maritime Plaza, Suite 300
 San Francisco, CA 94111
 (415) 954-0200


 Zhaoyang Li, Ph.D.
 Reg. No. 46,872

cc: Docket:



Attorney Docket No.:50623.266

Express Mail Label No. EV 721 156 183 US

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In Re Application Of:

Examiner: Sheeba Ahmed

Stephen Dirk Pacetti

Art Unit: 1773

Serial No: 10/606,711

Filed: June 26, 2003

For: COATINGS FOR IMPLANTABLE
MEDICAL DEVICES
COMPRISING HYDROPHOBIC
AND HYDROPHILIC POLYMERS

Mail Stop AF
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

AMENDMENT AND RESPONSE TO OFFICE ACTION

Dear Examiner Ahmed:

This communication responds to the Office Action mailed on November 7, 2006.